

| POSITION            | INITIALS                      | ID NO.         | DATE               |
|---------------------|-------------------------------|----------------|--------------------|
| FEE DETERMINATION   | <i>[Handwritten Initials]</i> | 75331          |                    |
| O.I.P.E. CLASSIFIER | <i>[Handwritten Initials]</i> | 45             | 9/3                |
| FORMALITY REVIEW    | <i>[Handwritten Initials]</i> | 08171<br>08971 | 9/19/99<br>3/20/00 |

**INDEX OF CLAIMS**

- ✓ ..... Rejected
- || ..... Allowed
- (Through numeral)... Canceled
- ∓ ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

WARD Decision

| Claim | Final | Original | Date |
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**BEST AVAILABLE COPY**

If more than 150 claims or 10 actions  
staple additional sheet here

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